FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** ORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31,2005

Estimated average burden hours per response16.00

SEC USE ONLY



	ed Stock of MindFlow Technologies, Inc.	05066968
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 E Rul	le 506
Type of Filing: New Filing	☐ Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about	The state of the s	
Name of Issuer (check if this is an amen	dment and name has changed, and indicate ch	ange.)
MindFlow Technologies, Inc.		
Address of Executive Offices	(Number and Street, City State, Zip Code)	Telephone Number (Including Area Code)
6504 International Parkway, Suite 2	400, Plano, Texas 75093	(972) 930-9988
Address of Principal Business Operations	(Number and Street, City State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	N/A	ROOMSONT
Brief Description of Business		
Software applications that facilitate	procurement and supply sourcing.	SEP 2 3 2017E
		THOMSON
		THOMSOM
Type of Business Organization		The second secon
corporation	☐ limited partnership, already formed	□ other (please specify):
☐ business trust	☐ limited partnership, to be formed	
	Month Year	
Actual or Estimated Date of Incorporation	or Organization: 0 1 9 9	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organizati	on: (Enter two-letter U.S. Postal Service al CN for Canada; FN for other foreign ju	1 1 1 1 1 1 1 1 1 1

GENERAL INSTRUCTIONS

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This Notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control

SEC 1972 (7-00)

1 of 9

2. Enter the information requested for the foll					
• Each promoter of the issuer, if the issu	_		•		
 Each beneficial owner having the povequity securities of the issuer; 	wer to vote or dispose	, or direct the vote or di	sposition of, 10	% oı	r more of a class of
 Each executive officer and director of issuers; and 	of corporate issuers a	and of corporate general	and managing	part	ners of partnership
• Each general and managing partner of	partnership issuers.	•			
	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if individual)					
Reddy, Jay					
Business or Residence Address (Number and S	treet, City, State, Zip	Code)			
6504 International Parkway, Suite 2400,					
Check Box(es) that Apply: □ Promoter □	Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if individual)					
Business or Residence Address (Number and S	treet, City, State, Zip	Code)			
Check Box(es) that Apply: ☐ Promoter ☐	Beneficial Owner	☐ Executive Officer	☑ Director		General and/or Managing Partner
Full Name (Last name first, if individual)					
Collier, D. Scott					
Business or Residence Address (Number and S	treet, City, State, Zip	Code)			
c/o Triton Venture Partners, 6801 N. Ca	pital of Texas Highw	yay, Building 2 – Suite 2	25, Austin, Tex	as 7	8731
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if individual) Roy, Ashutosh					
Business or Residence Address (Number and S	treet, City, State, Zip	Code)		7.4	
c/o eGain, 624 East Evelyn Avenue, Sun	nvvale. CA 94086			yşii i	당 보는 전기 전혀 하는 이번에 가려지 않는다. 이번 이번에 당당한 등 등 등 기계
	☐ Beneficial Owner	☐ Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if individual) Arrowsmith, Peter					
Business or Residence Address (Number and S	treet, City, State, Zip	Code)	<u> </u>		
c/o JMI Equity Fund, 12680 High Bluff	· • • • • • • • • • • • • • • • • • • •		0		
Check Box(es) that Apply: Promoter Promoter Check Box(es) that Apply: Promoter Promoter					General and/or Managing Partner
Full Name (Last name first, if individual) Rao, Upender					
Business or Residence Address (Number and S	Street, City, State, Zip	Code)			
1520 Spruce Street, Suite 500, Philadelp		的复数形式 化二氯乙烷酸 医脓肿 网络多洲 不知识。	aria da la companya d Tanggar da la companya		
	☐ Beneficial Owner	☐ Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if individual)					
Noell, Charles					
Business or Residence Address (Number and S	Street, City, State, Zip	Code)			
c/o JMI Equity Fund, 12680 High Bluff	Drive, Suite 200, Sar	Diego, California 9213	30		

A. BASIC IDENTIFICATION DATA

	A. BASIC IDENTIF	ICATION DATA		3** :	A 844 75 11 11 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15
3. Enter the information requested of the following	_				
• . Each promoter of the issuer, if the is	_	-			
Each beneficial owner having the po	wer to vote or dispose,	or direct the vote or disp	osition of, 10%	more	of a class of equity
securities of the issuer; • Each executive officer and director	. of commonate issues	and of company's company			mana af mantuanahin
issuers; and	f of corporate issuers	and of corporate general	and managing	part	ners of partnership
Each general and managing partner of the second secon	of partnership issuers.				
Check Box(es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if individual)					
Triton Venture Management, L.P.					
Business or Residence Address (Number and	Street, City, State, Zip	Code)			
6801 N. Capital of Texas Highway, Bu	ilding 2 – Suite 225, A	ustin, Texas 78731			
Check Box(es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if individual)					
Triton Venture Partners, L.P.					
Business or Residence Address (Number and	Street, City, State, Zip	Code)		,	
6801 N. Capital of Texas Highway, Bu	ilding 2 – Suite 225, A	ustin, Texas 78731		٧.	
Check Box(es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if individual)					
JMI Associates IV, L.L.C.					
Business or Residence Address (Number and	Street, City, State, Zip	Code)			
12680 High Bluff Drive, Suite 200, San	Diego, California 921	30			
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if individual)		Barrer Carlotte		ni N	
JMI Equity Fund IV, L.P.		Succession and the succession of the succession			
Business or Residence Address (Number and	Street, City, State, Zip	Code)			a julija je desila in da
12680 High Bluff Drive, Suite 200, San	Diego, California 921	30		ţ, f	

		ess y			B. INI	FORN	AAT	ION 2	ABO	UT OFFE	RING	September 1					
1. H	as the i	ssuer so	old, or does	s the issuer	intend to	sell, to	o non	-accre	dite	d investors	in this c	ffering?	·		Yes		10 R
	•			Α	nswer also	in App	endix	ι, Colu	mn 2	, if filing un	der ULO	E.					
2. V	√hat is t	the mini	mum inve	stment that	will be ac	cepte	d fro	m any	indi	vidual?					\$	N/A	
3. D	oes the	offerin	g permit jo	int owners	hip of a si	ngle u	ınit?								Yes		lo 🗷
										ll be paid o							
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0	r dealei	r. If mo	ore than fi	ve (5) per	sons to be					d persons of							
				or dealer on dividual)	опіу.	-									_		
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Busin	ess or F	Residenc	e Address	(Number a	and Street,	City,	State	e, Zip	Cod	e)							
Name	of Ass	ociated	Broker or	Dealer										_			
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Ri		ic 🗆	SD 🗖	TN 🗆	TX 🗖	UT		VT		VA 🗆	WA E			WI		WY 🗆	PR 🗆
				ndividual)					_	***			_				
Busin	ess or I	Residenc	ce Address	(Number	and Street,	, City,	State	e, Zip	Cod	e)							
Name	of Ass	ociated	Broker or	Dealer								· · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·
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Busin	ess or I	Residen	ce Address	(Number	and Street	, City,	, Stat	e, Zip	Cod	e)							
Name	of Ass	sociated	Broker or	Dealer					······						_	<u></u>	

				Has Solicit													11 04 4
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TN \square TX \square UT \square VT \square VA \square WA \square WV \square (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is					
	an exchange offering, check this box \square and indicate in the columns below the amounts of the securities for exchange and already exchanged.					
	Type of Security	C	Aggregate Offering Pri		Am	ount Already Sold
	Debt	\$	0		\$_	0
	Equity	\$	2,390,40	3	\$	2,390,403
	□ Common ⊠ Preferred				_	
	Convertible Securities (including warrants)	\$	2,390,40	3	\$_	2,390,403
	Partnership Interests	\$	0		\$_	0
	Other (Specify)	. \$	0		\$	0
	Total	\$	2,390.40	3	\$	2,390,403
	Answer also in Appendix, Column 3, if filing under ULOE.				-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."		Number			Aggregate ollar Amount
			Investors			of Purchases
	Accredited Investors		5		\$	2,390,403
	Non-accredited Investors		0		\$	0
	Total		5		\$	2,390,403
	Answer also in Appendix, Column 4, if filing under ULOE.				-	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.					
	Type of offering		Type of Security		D	ollar Amount Sold
			0		¢	0
	Rule 505	_	0		\$ \$	0
	Regulation A		0		\$. \$	0
	Rule 504 Total		0		\$ - \$	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				Ψ -	
	Transfer Agent's Fees				\$	0
	Printing and Engraving Costs				\$	0
	Legal Fees			Œ	\$.	25,000
	Accounting Fees				\$.	0
	Engineering Fees				\$	0
	Sales Commissions (specify finders' fees separately)				\$.	0
	Other Expenses (identify)				\$	0

25,000

e wier.	C. OFFERING PRICE, NUMBER OF INVESTORS, EX	PEN	SES	AND USE OF PE	OCE	EDS	
	b. Enter the difference between the aggregate offering price given in Part C - Question 1 and total expenses furnished in response to Part C 4.a. This difference is the "adjusted gross proceeds to the issuer."	- Q1	uestio	n		\$	2,365,403
5.	Indicate below the amount of the adjusted gross proceeds to the iss proposed to be used for each of the purposes shown. If the amount for is not known, furnish an estimate and check the box to the left of the estotal of the payments listed must equal the adjusted gross proceeds to the forth in response to Part C – Question 4.b above.	any p timat	urpos e. Th	se ne			
				Payments to Officers, Directors & Affiliates			Payments to Others
	Salaries and fees		\$			\$	
	Purchase of real estate		\$			\$	
	Purchase, rental or leasing and installment of machinery and equipment .		\$			\$	
	Construction or leasing of plant buildings and facilities		\$. , , , , , , , , , , , , , , , , , , ,		\$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$			\$	
	Repayment of indebtedness		\$		X	\$	2,365,403
	Working capital		\$			\$	
	Other (specify):		\$			\$	
			\$			\$	
	Column Totals		\$		E	\$	2,365,403
	Total Payments Listed (column totals added)			E \$	2,365	5,403	<u></u>
Š/ø×	D. FEDERAL SIGNA	TUR	E .			3.0	
the wr	e issuer has duly caused this notice to be signed by the undersigned duly a following signature constitutes an undertaking by the issuer to furnish tten request of its staff, the information furnished by the issuer to any le 502.	to the	U.S	Securities and E	xchang	ge Co	mmission, upon
Iss	uer (Print or Type) Signature	a d	ol M	Da	ite		
	MindFlow Technologies, Inc.			Se Se	ptembe	er 7, 2	005
Na	me of Signer (Print or Type) Title of Signer (R int or T	ype)			_		
	Jay Reddy President 4	Ü	<u>=0</u>				
	J						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of		
	such rule?	Yes □	No 🗷

See Appendix, Column 5, for state response.

- 2. The undersigned hereby undertakes to furnish to any state administrator of any state in which this notice if filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice if filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
MindFlow Technologies, Inc.	Hay feddy	September 7, 2005
Name (Print or Type)	Title of Signer (Print or Type)	
Jay Reddy	President & CEO	

1					APP	ENDIX				
Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offered in State (Part C-Item 2) Type of investor and amount purchased in State (Part C-Item 2) Part C-	1	. 2	2	3		4			5	
Intend to sell and aggregate to non-accredited investors in State (Part E-Item 1) Type of investor and amount purchased in State (Part C-Item 2) Part C-Item 2) Part C-Item 3) Part C-Item 3 Par	,								under	State
to non-accredited investors in State (Part B-Item 1) Conferred in State (Part B-Item 1) Conferred in State (Part C-Item 1) Conferred in State (Part C-Item 2) Conferred in State (Part C-I										
Investors in State (Part B-ltem 1)							_			
Part B-ltem 1 Part C-ltem 2 Part C-ltem 2 Part C-ltem 2 Part C-ltem 1		1								
Number of Accredited Investors		I								
Namber of Accredited Investors		(Part B	-item i)	(Part C-Item 1)		(Part C-	,		(Part E-	item 1)
AK	S				Accredited		Non- Accredited			
AK		 			Investors	Amount	Investors	Amount		
AZ										
AR										
CA										
CA	A.R	L	U	6 : 6	· · · · · · · · · · · · · · · · · · ·				<u> </u>	
CT	CA		×	Convertible Preferred Stock	3	\$1,467,857	0	0		×
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16.			eri olayoza (Tr.	APP	ENDIX						
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								Disquali	fication		
1							:	under			
			Type of security				•	ULO			
	Intend		and aggregate					(if yes,			
	to non-ac		offering price		Type of in			explana waiver g			
	investors		offered in State		amount purchased in State (Part C-Item 2)						
	(Part B-	Item 1)	(Part C-Item 1)	 .	(Part C-			(Part E-	item 1)		
				N I1 6		Number of					
				Number of Accredited		Non- Accredited					
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
SC				Investors	Amount	invesiors	Amount				
SD											
TN								<u> </u>			
111			Series C	<u> </u>							
		_	Convertible					_	_		
TX		×	Preferred Stock	1	\$781,125	0	0				
			\$781,125								
UT											
VT											
VA											
WA											
WV											
WI											
WY											
PR											